PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

	1	CLAIMS AS FILED - PART I								SMALL ENTITY						-
				((Column 1)	(Column	TYPE					O RS SM	OTHER SMALL E		ı	
	U.S. NATIONAL STAGE FEES							7 [MTE	T	FEE	7	RA	TE	F	-
	BASIC FEE			SMALI	L ENT. = \$ 150	LARGE ENT. =	LARGE ENT. = \$ 300		BASIC FEE		OR		 			_
	EXAMINATION FEE				PCT Article 33(1): \$ 50 / \$ 100	All other situations = \$ 100 / \$ 200		EXAM. FEE		1-		1	EXAM, F			_
	SEARCH FEE			ALL oth	A = \$50/\$100 er countries = 00/\$400	All other situation \$ 250 / \$ 50	SEARC	H FEE	-			SEARCH		= 2 = 41		
FEE FOR EXTRA SPEC. PGS.					minus 100 =	/ 50 =	X \$ 125 =					X \$ 25	in =	41	_	
	TOTAL CHARGEABLE CLAIMS			2	minus 20 =	•		X \$:	25 =		\dashv	OR	X \$ 50			_
	INDEPENDENT CLAIMS			1	minus 3 =	·		X \$ 1	00 =	-	\dashv	OR	X \$ 20			_
	MULTIPLE DE	PENDENT CLAIN	A PRESE	NT T			7	+ \$ 18	30 =			OR	+ \$ 360			_
ľ	* If the differ	ence in column	1 is less	than z	ero, enter "0"	in column 2		TOTA	AL.			DR	TOTAL		900	_
		CLAIMS A		ENDE	D - PART (3)	SMA	LL EN	TITY	 c)R	OTHE SMAL	ER TH	HAN	-
	۷ 	CLAIMS REMAINING AFTER AMENDMEN	- 1	-	HIGHES NUMBER PREVIOUS PAID FOR	R PRESENT	r]	RATE		ADDI IONA FEE	- 1	\int	RATE	7	ADDI- IONAL FEE	
AMENOMBAT	Total	•	Minus	5	••	=	7	X \$ 25	=		OF	₹ >	< \$ 50 =	7		-
AME	Independen	1 -	Minus			. =	7	X \$ 100	=		OF	X	\$ 200 =	1		1
	FIRST PRI	ESENTATION OF	MULTIPE	LE DEP	ENDENT CLAI	м	7 1	+ \$ 180 :	=		OR	+	\$ 360 =	1		l
•					TOTAL ADD: FEE	π.		OR	TOT	AL ADDIT	L		I			
		(Column 1)			(Column 2)	(Column 3)			-				•			1
		CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT		RATE	TIO	DOI- NAL		R	ATE	ПО	DOI- NAL EE	
	Total		Minus		44	=	\prod	X \$ 25 =			OR	X \$	50 =		\neg	
	Independent	•	Minus	ŀ	144	=	3	X \$ 100 =			OR	X\$:	X \$ 200 =		\neg	
1	FIRST PRES	ENTATION OF M	ULTIPLE	DEPEN	DENT CLAIM					\neg	OR		+ \$ 360 =			
							TC	TAL ADDIT. FEE		\Box	OR		OTAL ADDIT. FEE			
E (he Highest Nun	on 1 is less than the ober Previously Paid	For IN THE	IS SPACE	E is less than 20	. enter "20".										
K 0	he "Highest Num	ber Previously Paid : er Previously Paid F	For an Tha	S SPACE	E is less than '3'.	enter "3".	the app	propriate box	kı colum	n 1.						

FORM PTO-876 (Rev. 02/2005)

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